

CENTRUE FINANCIAL CORP  
 Form 5  
 January 15, 2008

**FORM 5**

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION  
 Washington, D.C. 20549**

OMB APPROVAL  
 OMB Number: 3235-0362  
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Check this box if no longer subject to Section 16. Form 4 or Form 5 obligations may continue. See Instruction 1(b).  
 Form 3 Holdings Reported Form 4 Transactions Reported

**ANNUAL STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES**

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

1. Name and Address of Reporting Person \*  
 DAIBER THOMAS A

2. Issuer Name and Ticker or Trading Symbol  
 CENTRUE FINANCIAL CORP  
 [TRUE]

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

(Last) (First) (Middle)

3. Statement for Issuer's Fiscal Year Ended (Month/Day/Year)  
 12/31/2007

Director  10% Owner  
 Officer (give title below)  Other (specify below)  
 PRESIDENT & CEO

122 W MADISON STREET

(Street)

4. If Amendment, Date Original Filed(Month/Day/Year)

6. Individual or Joint/Group Reporting

(check applicable line)

OTTAWA, IL 61350

Form Filed by One Reporting Person  
 Form Filed by More than One Reporting Person

(City) (State) (Zip)

**Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned**

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	(A) or (D)	Price	5. Amount of Securities Beneficially Owned at end of Issuer's Fiscal Year (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
COMMON STOCK	^	^	^	^	^	^	44,734 <sup>(1)</sup>	D	^
COMMON STOCK	^	^	^	^	^	^	4,118	I	401K PLAN
COMMON STOCK	^	^	^	^	^	^	1,440	I	SPOUSE IRA

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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SEC 2270 (9-02)

the form displays a currently valid OMB control number.

**Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned**  
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)		7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Amount or Number of S
						Date Exercisable (A)	Expiration Date (D)		
EMPLOYEE STOCK OPTION	\$ 22.92	Â	Â	Â	Â Â	11/13/2006	10/19/2014	COMMON STOCK	18,
EMPLOYEE STOCK OPTION	\$ 21.88	Â	Â	Â	Â Â	11/13/2006	10/08/2013	COMMON STOCK	24,
EMPLOYEE STOCK OPTION	\$ 22.5	Â	Â	Â	Â Â	11/13/2006	12/29/2012	COMMON STOCK	14,
EMPLOYEE STOCK OPTION	\$ 19.58	Â	Â	Â	Â Â	11/13/2007	07/07/2013	COMMON STOCK	12,

## Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
DAIBER THOMAS A 122 W MADISON STREET OTTAWA, IL 61350	Â X	Â	Â PRESIDENT & CEO	Â

## Signatures

THOMAS A. DAIBER  
01/15/2008

\*\*Signature of Reporting Person

Date

## Explanation of Responses:

\* If the form is filed by more than one reporting person, see Instruction 4(b)(v).

\*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

(1) ALL SHARES ARE HELD INDIVIDUALLY, EXCEPT FOR 16,968 SHARES HELD IN A JOINT ACCOUNT WITH SPOUSE.

(2) THIS OPTION WILL VEST IN EQUAL INSTALLMENTS OF 2,500 SHARES PER YEAR OVER 5 YEARS BEGINNING 11/13/07.

Note: File three copies of this Form, one of which must be manually signed. If space provided is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.